

AMENDMENT TRANSMITTAL LETTER

|                      |                                                               |                        |
|----------------------|---------------------------------------------------------------|------------------------|
| Ser. No.: 10/768,542 | Filed: January 30, 2004                                       | Examiner: Hong Sol Cho |
| Art Unit: 2616       | Title: <b>INTERNET ACCESS THROUGH CONVENTIONAL TELEPHONES</b> |                        |

To the Commissioner for Patents:

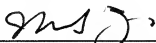
Transmitted herewith is an *Amendment A* in the above-identified application.  
The fee has been calculated as shown below.

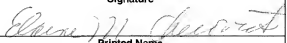
| CLAIMS AS AMENDED                   |                                                                                                                                                                                                                                                                                                                                     |       |                                    |                             |         |                 |
|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------|-----------------------------|---------|-----------------|
|                                     | Claims remaining after amendment                                                                                                                                                                                                                                                                                                    |       | Highest Number Previously Paid For | No. of Extra Claims Present | Rate    | Additional Rate |
| Total Claims                        | 12                                                                                                                                                                                                                                                                                                                                  | Minus | 20                                 | 0                           | X \$50  | \$0.00          |
| Indep. Claims                       | 2                                                                                                                                                                                                                                                                                                                                   | Minus | 3                                  | 0                           | X \$210 | \$0.00          |
| TOTAL                               |                                                                                                                                                                                                                                                                                                                                     |       |                                    |                             | =       | \$0.00          |
| <input type="checkbox"/>            | No additional fee is believed due however, if this is not the case, the Commissioner is hereby authorized to charge any and all fees to Deposit Account No. 06-0308.                                                                                                                                                                |       |                                    |                             |         |                 |
| <input checked="" type="checkbox"/> | Payment for the filing of this Amendment and any appropriate extension of time fees are authorized to be charged to a Credit Card. The appropriate form PTO-2038 is enclosed for this purpose. If the Credit Card is unable to be charged, please charge any and all fees or credit any overpayment to Deposit Account No. 06-0308. |       |                                    |                             |         |                 |
| <input checked="" type="checkbox"/> | Applicant(s) hereby petition the Commissioner under 37 C.F.R. § 1.136(a) and request a 3 month extension of time to respond to the outstanding Office Action.                                                                                                                                                                       |       |                                    |                             |         |                 |

Respectfully submitted,

Fay Sharpe LLP

1/18/08  
Date

  
John S. Zanghi, Reg. No. 48,843  
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216-861-5582

| CERTIFICATE OF MAILING OR TRANSMISSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| I certify that this Amendment Transmittal Letter and accompanying documents are being<br><input type="checkbox"/> deposited with the United States Postal Service as First Class mail under 37 C.F.R. § 1.8, addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.<br><input checked="" type="checkbox"/> transmitted to the USPTO by electronic transmission via EFS-Web on the date indicated below.<br><input type="checkbox"/> deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10, addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below. |                                                                                                  |
| Express Mail Label No.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Signature<br> |
| Date<br>1-18-08                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Printed Name<br>Elaine M. Checovich                                                              |